

10-19-00

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Sm | | 8.30/00 |
| O.I.P.E. CLASSIFIER | 11 | 45 | 9/9/00 |
| FORMALITY REVIEW | AT | SC832 | 10-10-00 |
| RESPONSE FORMALITY REVIEW | Chad | 67477 | 12/02/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
+ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | 1 | 1 | 11/5/00 |
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| 3 | 3 | 3 | 11/5/00 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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